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990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

OMB No. 1545-1150

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990. A For the 2016 calendar year, or tax year beginning 2016, and ending 20 C Name of organization B Check if applicable D Employer identification number Address change MIB Agents Inc 811109906 Room/suite Name change Number and street (or P.O. box, if mail is not delivered to street address) E Telephone number Initial return 518 524-3890 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Barnard, VT 05031 Number ▶ 🔯 Application pending Other (specify) ✓ Cash Accrual H Check ▶ ☐ If the organization is not G Accounting Method: Website: > mibagents.org required to attach Schedule B J Tax-exempt status (check only one) - V 501(c)(3) 501(c) ((Form 990, 990-EZ, or 990-PF). ◄ (insert no.) ☐ 4947(a)(1) or K Form of organization: Corporation ☐ Trust ☐ Association Other L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets 149 814 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) [3] Pant Check if the organization used Schedule O to respond to any question in this Part I. 6 Contributions, gifts, grants, and similar amounts received Ð. 1 139,146 Program service revenue including government fees and contracts 2 2 12 3 3 4 Investment income 4 Gross amount from sale of assets other than inventory 5a 5a Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Revenue **b** Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 10.668 Less; direct expenses from gaming and fundraising events . . . 224 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract Gross sales of inventory, less returns and allowances 10,444 6d 7a 7a Gross profit or (loss from) sales of inventory (300 tract line 7b from line 7a) C 7c Other revenue (describe in Schedule O) 8 R Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 9 149,590 10 Grants and similar amounts paid (list in Schedule O) 10 5.099 Benefits paid to or for members 11 11 12 Salaries, other compensation, and employee benefits 2 12 679 S 13 Professional fees and other payments to independent contractors 2. 13 14 14 Printing, publications, postage, and shipping . . . 15 Other expenses (describe in Schedule O)

SEE SCHEQUE C 15 874 16 16 47,106 17 Total expenses. Add lines 10 through 16 . 53,079 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 96,511 Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 19 0 Set 20 Other changes in net assets or fund balances (explain in Schedule O) . . . 20 ٥ Net assets or fund balances at end of year. Combine lines 18 through 20 96.511 Form 990-EZ (2016)

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Par	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V) Check if the organization used Schedule O to respond to any question in this				•
	instructions for 1 art vy officer in the organization used schedule of to respond to any question in this	-an			-
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No	
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		•	· <u>7</u>
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~	
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b			
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		v	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		V	7
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0				
b 38a	Did the organization file Form 1120-POL for this year?	37b 38a		<u> </u>	2
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A	000		<u> </u>	
39	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on line 9				
b	Gross receipts, included on line 9, for public use of club facilities				
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0	i			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		V	
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				1000
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization				
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		سا	
41	List the states with which a copy of this return is filed ▶ VT				
42a	The organization's books are in care of ▶ Mary Kedzie Telephone no. ▶ 3	12 671	1-0544		
	Located at ▶ 1609 S Surrey Lane Arlington Heights, IL ZIP + 4 ▶	6005-	3561		
b		42b	Yes	No ✓	
	If "Yes," enter the name of the foreign country: ▶		1		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
С	If "Yes," enter the name of the foreign country: ▶	42c			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. Þ	- 🗆	
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			N/A	
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		Yes	<u>No</u>	•
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	44a		<u>مس</u> مر	
	·	44b		سنة	
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		<u> </u>	
. سونم	explanation in Schedule O	44d			
45a b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	45a		<u>سسا</u> س	
		45b	- 1		

Form 990-E	Z (2016)						Pa	ige 4
46 Die	d the organization engage, directly or in candidates for public office? If "Yes,"	ndirectly, in political c	ampaign activities on	behalf	of or in opposi	tion	Yes	No
Part VI	Section 501(c)(3) organizations		, raiti	<u> </u>		• 46		
I GIL VI	All section 501(c)(3) organization		stions 47–49b and	52. and	d complete th	e tables f	or line	·S
	50 and 51.	4.00		·-,		io tubioo i	0	•
	Check if the organization used Sc	hedule O to respond	I to any question in t	his Part	VI			
							Yes	No
	d the organization engage in lobbying ar? If "Yes," complete Schedule C, Par		section 501(h) election		ect during the	tax 47		√ €
48 ls	the organization a school as described i	n section 170(b)(1)(A)(i	i)? If "Yes," complete	Schedul	eE	. 48		V E
	d the organization make any transfers t		_			. 49a		~
	'Yes," was the related organization a se					. 49b		
	omplete this table for the organization's nployees) who each received more that							key
	iployees) who each received more than	T	T		ealth benefits,	e, enter iv	ione.	
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contribut benefit p	tions to employee lans, and deferred mpensation	(e) Estimate other con		
None				 			·	
				1		· · · · · · · · · · · · · · · · · · ·		
					· · · · · · · · · · · · · · · · · · ·			
				 				<u></u>
		1)				
								
		1		}	}			
f To	tal number of other employees paid ov	er \$100,000	. >					
51 Cc	omplete this table for the organization	's five highest compe	ensated independent	contrac	tors who each	received	more	than
\$1	00,000 of compensation from the orga	anization. If there is no	one, enter "None."			***************************************		 ,
	(a) Name and business address of each independ	dent contractor	(b) Type of sen	исе	(c)	Compensati	on	
None								
110116								
								-
		,						
·			1					
d To	ital number of other independent contri	actors each receiving	over \$100 000	▶	<u> </u>			
	d the organization complete Schedu	•			s must attach	n a		
	mpleted Schedule A					.▶ ✓ Yes		D
Under penal true, correct	Ities of penury, I declare that I have examined this , and complete. Declaration of preparer (other tha	return, including accompan n officer) is based on all info	lying schedules and statementation of which preparer	ents, and t has any kn	o the best of my kr owledge	owledge and	belief, it	IS
	NOTEZ				5/15/	17-		
Sign	Signature of officer				Date			
Here	Ann Graham, President	. 			·			
	Type or print name and title	Preparer's signature	Da	ate		PTIN		
Paid	Print/Type preparer's name	reparer a aignature	De		Check Self-emplo	rf		
Prepare	_					yeu		
Use On	ly Firm's name ▶ Firm's address ▶				Firm's EIN ▶ Phone no.			
May the II	RS discuss this return with the prepare	r shown above? See	instructions			▶ ☐ Yes	□ N	
					······································	Form 99		2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

201

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990 Name of the organization

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

MIB #	Agents	Inc					81-11	09906	
 Par	till	Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instruction	ons.	
1									
4	∏ A i	medical research organizationspital's name, city, and state	on operated in co	onjunction with a hos	oital desc	ribed in :	section 170(b)(1)(A)	• •	
5	se	organization operated for ection 170(b)(1)(A)(iv). (Com	plete Part II.)					tai unit	described in
7	☑ An de	federal, state, or local govern n organization that normally scribed in section 170(b)(1)	receives a subs (A)(vi). (Complet	tantial part of its sup te Part II.)	port from			n the go	eneral public
		community trust described in		· · · · · · · · · · · · · · · · · · ·	•				
	or un	agricultural research organ university or a non-land-gra siversity:	nt college of agr	iculture (see instruction	ons). Ente	er the nar	ne, city, and state of	f the col	llege or
	red Su ac	n organization that normally in ceipts from activities related apport from gross investment aquired by the organization a	to its exempt fu t income and un fter June 30, 19	nctions—subject to c related business taxal 75. See section 509(a	ertain exc ble incom i)(2). (Coi	ceptions, ne (less s mplete Pa	and (2) no more tha ection 511 tax) from art III.)	n 33¹/₃9	% of its
		organization organized and	•		,		` ' ' '		
12	of Ch	n organization organized and one or more publicly suppo neck the box in lines 12a thro	orted organization rugh 12d that des	ns described in secti scribes the type of sup	ion 509(a oporting o	i)(1) or so organizati	ection 509(a)(2). Se on and complete line	e sect ions 12e,	on 509(a)(3). 12f, and 12g.
а		Type I. A supporting organization supporting organization. Yes	(s) the power to	regularly appoint or e	lect a ma	jority of 1			
b		Type II. A supporting organization(s). You must	the supporting o	rganization vested in	the same				
c		Type III functionally integ its supported organization(s) (see instructio	ns). You must comp	lete Part	IV, Sect	ions A, D, and E.	,	,
d		Type III non-functionally ithat is not functionally integrequirement (see instructionally integret)	grated. The orga	nization generally mu	st satisfy	a distrib	ution requirement an		
е		Check this box if the organ functionally integrated, or	Type III non-func	tionally integrated sur	oporting	organizat	ion.	e II, Typ ,	e III
f g		er the number of supported of the company of the following information		oorted organization(s).		• • •		• • {	J
	(i) Nam	ne of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	other :	Arnount of support (see tructions)
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section	on A. Public Support							
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not							
_	include any 'unusual grants.")					149,814	149,814	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3					149,814	149,814	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)						64,232	
6	Public support. Subtract line 5 from line 4			<u> </u>	<u> </u>	11	85,582	
	on B. Total Support		· · · · · · · · · · · · · · · · · · ·					
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
7	Amounts from line 4					149,814	149,814	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					o	0	
9	Net income from unrelated business activities, whether or not the business is regularly carried on					О	0	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					o	0	
11	Total support. Add lines 7 through 10						149,814	
12	Gross receipts from related activities, etc.					12		
13	First five years. If the Form 990 is for the organization, check this box and stop he	re				ear as a section		
	on C. Computation of Public Suppor					T T		
14	Public support percentage for 2016 (line 6					14	<u>%</u>	
15	Public support percentage from 2015 Sch	nedule A, Part	II, line 14 .			15	%	
16a	33¹/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33¹/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
b	this box and stop here. The organization	qualifies as a	publicly suppo	orted organizat	ion		> 🗆	
17a	10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
b	10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
18	Private foundation. If the organization di instructions	d not check a	box on line 13	3, 16a, 16b, 17:	a, or 17b, ched	k this box and	see ▶ □	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Canada) - 1 - 1 - 1	ه اد مدام مام د ده د کار د		10 at David Law 2		Called As a call	
(Complete of	nly if you checked t	ne box on line	io of Partior	i the organization	Tailed to quairy	/ under Part II.
	= -			-		
if the organiz	ation fails to qualify	unger the test	s listea below,	please complete	Part II.)	

secu	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the		<u> </u>			. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						······································
	furnished by a governmental unit to the						
	organization without charge	į.					
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						······································
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support	h.,	<u> </u>	<u> </u>	1 · · · · · · · · · · · · · · · · · · ·		······································
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses			ļ			
	acquired after June 30, 1975					:	
С	Add lines 10a and 10b						
11	Net income from unrelated business						,
	activities not included in line 10b, whether			1			
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
_	loss from the sale of capital assets		-				
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	re					Þ 🗆
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line					15	%
16	Public support percentage from 2015 Scl			<u> </u>	<u> </u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2016 (•	• •	-		17	<u>%</u>
18	Investment income percentage from 2015					18	%
19a	331/3% support tests-2016. If the organ						
	17 is not more than 331x%, check this box		-			-	
b	331/3% support tests—2015. If the organiz						
	line 18 is not more than 331/3%, check this				•	- · · · -	
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instruc	ctions 🕨 🗌

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secti	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P on A. All Supporting Organizations	artv	.)	
	ON 7 II O O O O O O O O O O O O O O O O O		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	-	
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to]		

determine whether the organization had excess business holdings.)

10b

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described in (a) above?	11b		<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	L	<u>L</u>
Secti	on B. Type I Supporting Organizations		122	1
1	Did the directors trustees or membership of one or more compared arganizations have the assure to		Yes	No
•	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		1	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	<u> </u>		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations	-	·	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
		1		<u> </u>
Secti	on D. All Type III Supporting Organizations			T = -
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations	·	····	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see it	nstruc	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	structi	ions).
2	Activities Test. Answer (a) and (b) below.	Γ	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	\Box	103	140
•	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		1	
	activities but for the organization's involvement.	2ь		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or] [1	
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7	· · · · · · · · · · · · · · · · · · ·	-
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of secunties	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2	,	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	ly in	tegrated Type III supporti	ng organization (see

	le A (Form 990 or 990-EZ) 2016			Page 7
Part		s) Supporting Organ	zations (continued)	
	ion D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)		······································	
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.		······································	
8	Distributions to attentive supported organizations to which	h the organization is res	sponsive	
•	(provide details in Part VI). See instructions.		-	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
а				
b			· · · · · · · · · · · · · · · · · · ·	
C	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
ì	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
<u>b</u>	Excess from 2013			
<u>c</u>				
<u>d</u>				
е	Excess from 2016	<u> </u>		